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Date: November 12, 2003

By:   
Rena lov

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: MAURER, BARRY J. *et al.*

APPLICATION NO.: Not yet assigned

FILED: November 12, 2003

FOR: **PPMP AS A CERAMIDE CATABOLISM  
INHIBITOR FOR CANCER TREATMENT**

Transmittal of Utility Patent Application  
for Filing Under 37 CFR §1.53(b)

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir: Transmitted herewith for filing is a patent application by inventors: Barry James Maurer, MD, PhD and Charles Patrick Reynolds, MD, PhD, and entitled:

**PPMP AS A CERAMIDE CATABOLISM INHIBITOR FOR CANCER  
TREATMENT**

1. Enclosed are:
  - ☒ This Transmittal letter.
  - ☒ One stamped, self-addressed postcard for PTO datestamp.
  - ☒ Certificate of Express Mail.
  - ☒ One utility patent application containing text pages 1-53 and 7 Sheets of drawings (figures 1 through 13).
  - ☐ Declaration of Inventorship (unsigned).
  - ☐ Assignment(s) for recordation with transmittal sheet.
  - ☐ Executed Power of Attorney by Assignee.
  - ☐ Sequence listing printout, diskette, and matching declaration.
2. U.S. Priority
  - ☐ This application claims the benefit of U.S. Application No. «SerialNo» filed «FileDate», which is incorporated herein in its entirety by reference. *(also type on P.1 of Spec.)*

- ☒ **Conditional Petition for Extension of Time:** An Extension of Time is requested to provide for timely filing *if* required to establish copendency with the parent after all papers filed herewith have been considered.

3. **Foreign Priority**

- ☐ Priority of Application No. «SerialNo» filed in on is claimed under 35 USC §119.
- ☐ A certified copy of this priority document is enclosed.

4. **Fees**


The filing fee has been calculated as shown below:

For:	(Col. 1) No. Filed	(Col. 2) No. Extra	Small Entity			Other Than a Small Entity	
			Rate	Fee		Rate	Fee
Basic Fee				\$375.00	or		\$750.00
Total Claims	- 20		x \$ 9 =	\$	or	x \$ 18 =	\$
Independent Claims	- 3		x \$42 =	\$	or	x \$ 84 =	\$
<input type="checkbox"/> Multiple Dependent Claim Presented			+ \$140 =	\$	or	+ \$280 =	\$
*If the difference in Col. 1 is less than zero, enter "0" in Col. 2.			TOTAL	\$	or	TOTAL	\$

- ☒ Applicant claims small entity status. See 37 CFR §1.27.
- ☐ A check in the amount of \$ is enclosed to cover the Filing Fee.
- ☐ Please charge Deposit Account No. 50-2586 in the amount of \$
- ☐ The Commissioner is hereby authorized to charge fees under 37 CFR §1.16 and §1.17 which may be required, or credit any overpayment to Deposit Account No. 50-2586.
- ☒ **\*Filing fee to be submitted in response to anticipated receipt of Notice to File Missing Parts of Application. DO NOT CHARGE DEPOSIT ACCOUNT.**

Respectfully submitted,  
Perkins Coie LLP

Date: Nov. 12, 2003

  
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